## City of Taylorsville

FEB - 2 2020

## Annual Campaign Finance Statement for Elected Officials/Candidates

Report of Campaign Contributions and Expenditures - Due March 1st of Each Year

Name of Elected Official/Candidate			
Daniel Armstrong			
Street Address	City	State	Zip Code
	Taylorsville	UT	84107
Office Held City Council	District Number 5	Area Code & Phone Number (801) 599-8961	Email Address darmstrong@taylorsvilleut.org

### TAYLORSVILLE CITY CODE **CHAPTER 2.36 ELECTIONS**

#### 2.36.040 **CAMPAIGN FINANCE STATEMENTS:**

- All candidates for municipal office shall comply with campaign finance disclosure requirements as prescribed in Utah Code Ann. §10-3-208 or its successor.
- In addition to the requirements set forth in Section 2.26.040(A) above, each elected official and/or candidate for municipal office shall file with the city recorder a campaign finance statement containing the information required in this Section on March 1 of each year.

Report Verification

Daniel J. Armstrong

Signature of Elected Official/Candidate

affirm that this Report of Contributions and Expenditures is true, accurate and correct to the best of my knowledge.

#### To File this Form

Email, mail or deliver to:

Jamie Brooks Taylorsville City Recorder 2600 West Taylorsville Blvd. Taylorsville, UT 84129 jbrooks@taylorsvilleut.gov

#### For More Information

Contact the Recorder's Office (801) 955-2006

## For Office Use Only

Date Received Feb

Time Received 1:30
Received by James

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2920 W. Robinwood Dr	Taylorsville		UT	84107
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## For Office Use Only

Date Received 2-2-21

Time Received 2:34
Received by 1800

## Summary Page

(Complete this page after filling out other schedules)

CONTRI	BUTIONS RECEIVED	
		0.00
	TOTAL CONTRIBUTIONS RECEIVED (See Schedule A)	

EXPEND	ITURES MADE	
		0.00
	TOTAL EXPENDITURES MADE (See Schedule B)	

# Schedule A Itemized Contributions Received

Attach additional pages if needed

ttach additional page Date Received	Name of Donor	Address	Amount of Contribution
	- Annual I		
SUBTOTAL FOR	R THIS PAGE		0.00
TOTAL CONTRI	BUTIONS RECEIVED (Sum of subtot	tals from all Schedule A pages)	0.00

# Schedule B Itemized Expenditures Made

Attach additional pages if needed

Attach additional pa  Date of  Expenditure	Name of Recipient	Purpose	Amount of Expenditure
	A		
SUBTOTAL FO	OR THIS PAGE		0.00
TOTAL EXPENDITUTRES MADE (Sum of subtotals from all Schedule B pages)			0.00